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Application Number

| TRANSMITTAL<br>FORM                                      |                            |  | Application Number     |          | 10/577,764   |
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|  |                            |  | Filing Date            |          | October 21, 2004 (Int'l)                                       |
|  |                            |  | First Named Inventor   |          | Tetsutaka YABUTA   |
|  |                            |  | Art Unit               |          | 2621   |
| (to be used for all correspondence after initial filing) |                            |  | Examiner Name          |          | G. Topgyal   |
| Total Number of Pages in This Submission 10              |                            |  | Attorney Docket Number |          | r 278542008400   |
| ENCLOSURES (Check all that apply)                        |                            |  |                        |          |  |
| Fee Transr   | ransmittal Form Drawing(s) |  |                        |          | After Allowance Communication to TC                            |
| Fee Attached Licensing-rel                               |                            |  | ated Papers            |          | Appeal Communication to Board of Appeals and Interferences     |
| X Amendment/Reply (9 pages) Petition                     |                            |  |                        |          | Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) |
| After Final Petition to Co                               |                            |  |                        |          | Proprietary Information  |
| Affidavits/declaration(s)                                |                            | Power of Attorney, Revocation Change of Correspondence Address |                        |          | Status Letter  |
| Extension of Time Request                                |                            | Terminal Disclaimer  |                        |          | Other Enclosure(s) (please Identify below):                    |
| Express Abandonment Request                              |                            | Request for Refund   |                        |          |  |
| Information Disclosure Statement                         |                            | CD, Number of CD(s)  |                        |          |  |
| Certified Copy of Priority Document(s)                   |                            | Landscape Table on CD  |                        |          |  |
| Reply to Missing Parts/ Incomplete Application           |                            | Remarks  |                        |          |  |
| Reply to Missing Parts under                             |                            | Customer No. 25225   |                        |          |  |
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|  |                            |  |                        |          |  |
| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT               |                            |  |                        |          |  |
| Firm Name  | MORRISON & FOERSTER LLP    |  |                        |          |  |
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